

Identification and prediction of fall risk in mentally retarded elderly people

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Primary objective: To determine the most important risk factors for falls in elderly people with mental retardation and to describe which of these factors may be modified by intervention/treatment, in order to prevent falls. Secondary objective: To...

Ethical review	Approved WMO
Status	Pending
Health condition type	Cognitive and attention disorders and disturbances
Study type	Observational non invasive

Summary

ID

NL-OMON30542

Source

ToetsingOnline

Brief title

Determinants of falls in mentally retarded elderly

Condition

- Cognitive and attention disorders and disturbances

Synonym

mental disability, Mental retardation

Research involving

Human

Sponsors and support

Primary sponsor: Universitair Medisch Centrum Sint Radboud

Source(s) of monetary or material Support: Ministerie van OC&W

Intervention

Keyword: Determinants of falls, Elderly, Fall incidence, Mental disability

Outcome measures

Primary outcome

The primary outcome measure is the fall incidence. The following potential risk factors for falls will be determined:

- Balance and gait skills and lower extremity muscle strength
- Sensory quality (vision, proprioception, hearing)
- cognitive functioning (intelligence, reaction time, memory)
- behavioral functioning (communication, ADL skills, social skills)

Secondary outcome

Complex balance and gait skills. After a perturbation, balance and gait correcting responses will be assessed by means of instrumented measurements.

Study description

Background summary

It is commonly known that mentally disabled are at higher risk for falls and fall-related injuries than their mentally healthy counterparts. The fall risk increases with age and peaks in the geriatric population. Prospective studies on fall risk factors in the population of the older mentally disabled are not available yet. This knowledge, however, is a prerequisite for the development of targeted intervention strategies. In the general population of elderly, risk factors for falls have been well-documented: mobility impairments (balance, gait, strength), the use of psychotropic drugs, impaired vision, and cognitive and behavioral impairments play an important role. It is largely on these domains that disease-specific deficits are present in the mentally disabled. It can therefore be expected that risk factors for falls in the older mentally disabled are similar to those in the general population of elderly, but that their relative contribution differs. In addition, the possibilities for

treatment or prevention may also be quite different.

Study objective

Primary objective:

To determine the most important risk factors for falls in elderly people with mental retardation and to describe which of these factors may be modified by intervention/treatment, in order to prevent falls.

Secondary objective:

To determine whether balance and gait skills, as measured by clinical tests, show deficits in mentally retarded elderly when compared to a reference group of mentally healthy controls.

To identify the role of changes in balance and gait correcting responses in the risk of falls in mentally retarded elderly.

Study design

In the proposed project, extensive assessments will be conducted on the various domains of (potential) fall risk factors in a total of 100 older mentally disabled, especially on the domain of motor skills, sensory qualities, and cognitive and behavioral functioning. In addition, patient files will be screened for other fall risk factors, such as the use of psychotropic drugs and the presence of comorbidities. During a follow-up period of 2 years, fall incidents in these participants will be monitored prospectively. In subgroups of participants additional instrumented assessments of complex balance and gait skills will be conducted, as well. The results will be compared to the performance of mentally healthy age-matched controls. In addition, within the group of mentally retarded elderly, the performance of non-fallers will be compared to the performance of recurrent fallers.

Study burden and risks

N.A.

Contacts

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Trial sites

Listed location countries

Netherlands

Eligibility criteria

Age

Adults (18-64 years)

Elderly (65 years and older)

Inclusion criteria

- age > 50 years
- intellectual deficit since young age
- ability to understand simple task instructions
- the ability to give informed consent, if necessary via the participant's caregiver

Exclusion criteria

- Epilepsy
- the inability to walk unassisted
- severe communicative or behavioral problems that complicate participation

Study design

Design

Study type: Observational non invasive

Masking: Open (masking not used)

Control: Uncontrolled

Primary purpose: Basic science

Recruitment

NL
Recruitment status: Pending
Start date (anticipated): 01-07-2007
Enrollment: 124
Type: Anticipated

Ethics review

Approved WMO
Application type: First submission
Review commission: CMO regio Arnhem-Nijmegen (Nijmegen)

Study registrations

Followed up by the following (possibly more current) registration

No registrations found.

Other (possibly less up-to-date) registrations in this register

No registrations found.

In other registers

Register	ID
CCMO	NL14464.091.07